



**Complaint Form  
Silver Key Senior Services**

Silver Key Senior Services, Inc. operates its services, programs and activities without regard to race, creed, color, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, genetic information, age, physical or mental ability, veteran status, military obligations, and marital status or any other status protected by applicable local, state, or federal law. Silver Key abides by the provisions of all applicable civil rights laws and regulations, including without limitations: ***Title VI of the Civil Rights Act of 1964; the Americans with Disabilities Act (ADA); and the Older Americans Act (OAA).***

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, please contact Complaint/ADA Compliance Officer, at 719-884-2300. The completed form must be returned to Complaint/ADA Compliance Officer, Silver Key Senior Services, 1625 S. Murray Blvd., Colorado Springs, CO 80916

**Si necesita información en otro idioma, comuníquese al 719-884-2300.**

Person(s) with complaint:	Phone:
Street Address:	City, State and Zip Code:
Person who is taking the complaint:	Job Title:
Date:	Organization (if not Silver Key):

What is the nature of the complaint?

---

---

---

Date of Incident: \_\_\_\_\_

If you believe you have been **discriminated** against, which of the following best describes the reason for the alleged discrimination? (Circle one or more)

• Race	• Religion
• Color	• Sex/sexual orientation/gender identity or expression
• Age	• Physical/mental ability
• National Origin (Limited English Proficiency)	• Veteran status/military obligations
• Ethnicity	• Other: _____
• Marital Status	

Date of Incident: \_\_\_\_\_



## Complaint Form Silver Key Senior Services

Please describe the alleged **discrimination** incident. Provide the names and titles of all Silver Key employees and/or volunteers involved if available. Explain what happened and who you believe was responsible.

Have you filed a Title VI complaint (**discrimination**) with any other federal, state or local agencies? (Circle one) Yes / No

If so, list agency / agencies and contact information below:

---

Agency: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Complainant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print or Type Name of Complainant

## Resolution to situation:

---

---

---

**Signed/dated:**

**SCAN to:** Joanne Dreher: [jdreher@silverkey.org](mailto:jdreher@silverkey.org) and Laurie Wood [lwood@silverkey.org](mailto:lwood@silverkey.org) Hard copies: put in Joanne Dreher's mailbox.



## COMPLAINT INVESTIGATION PROCEDURES:

1. Within 15 business days, the complainant will receive an acknowledgement letter by registered mail informing him/her IF the complaint warrants such action as determined by the Title VI coordinator. Minor irritations, complaints, suggestions and issues that can be resolved with a conversation by phone or in person will be documented on the complaint form and will go no further.
2. If the complainant remains dissatisfied with Silver Key's resolution of the complaint, she/he has the right to file a complaint with:

Pikes Peak Area Council of Governments  
Title VI Coordinator  
15 South 7<sup>th</sup> Street  
Colorado Springs, CO 80905  
(719) 471-7080

Colorado Dpt. of Regulatory Agencies  
1560 Broadway #1545  
Denver, CO 80902  
(303) 894-7855

Colorado Dpt. of Health Care Policy & Financing  
1570 Grant Street  
Denver, CO 80203-1818  
(303) 866-2994

Behavioral Health Administration  
710 S. Ash Street  
Denver, CO 80246  
(303) 866-7400

Colorado Dpt. of Public Health & Environment  
4300 Cherry Creek S.  
Denver, CO 80246  
(303) 692-2000

### Transportation Complaints

Region 8 Office  
Federal Transit Administration Byron Rogers Federal Building  
1961 Stout Street  
Suite 13-301  
Denver, CO 80294 United States  
**Phone:** [303-362-2400](tel:303-362-2400)  
**Fax:** [303-292-5904](tel:303-292-5904)

Colorado Department of Transportation  
Suriah Bahr - Title VI & ADA Program Manager  
2829 W. Howard Place, Denver, CO 80204  
[CDOT\\_Accessibility@state.co.us](mailto:CDOT_Accessibility@state.co.us)  
Voice Mail: 303-512-4220

Federal Transit Administration  
Office of Civil Rights  
Attention: Complaint Team  
1200 New Jersey Avenue, SE, Washington, DC 20590  
Phone: (888) 446-2511